MISSISSIPPI DEPARTMENT OF TRANSPORTATION
QMP HMA
Asphalt Paving Inspectors Daily Report

TMD-004
Rev 3/03

Project No.: _____ County: _____ Contractor: _____ Date: _____

MDOT JMF No. _____ Mix Type: _____ Temperature: AM _____ PM _____

Beginning Station No. / Lane _____ Total Tons Today: _____
Ending Station No. / Lane _____ Theor. Tons Today: _____
Total Paving Length, ft. _____ Over/Under Today: _____

INSTRUCTIONS:

Use Table 1 first production day, or bias update day, for density and bias determination.

Fill in Table 2 on bias update days. Use Table 3 on normal production days.

Req. No. Lots _____
Lot Length, ft. _____

Table 1

Lot	1	2	3	4	5	6	7	Average
Beginning Station								
Test Location, Sta.								
Offset to rt., ft.								
Core Density, pcf								
Nuclear Density, pcf								
Gauge Bias, pcf								
Max. Den. (Note 1), pcf								
Compaction (Cores), %								
Pay Factor								

Table 2

	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	New Gauge Bias
Prev. Gauge Biases:											

Table 3 **Lot Compaction**

Lot	1	2	3	4	5	6	7
Nuclear Density, pcf							
Location 1							
Location 2							
Location 3							
Location 4							
Location 5							
Average							
Bias							
Corr. Density, pcf							
Max. Den. (Note 1), pcf							
Compaction, %							
Pay Factor (Note 2)							

Lot	1	2	3	4	5	6	7
Core Density, pcf							

Note 1: Max. Den. = Average Gmm for the day x 62.24

Note 2: Any pay factor < 1.0 must be verified by core density.

Average Daily Compaction: _____

REMARKS: _____

DISTRIBUTION:
Original to State Materials Engineer
Copy to State Construction Engineer
Copy to District Materials Engineer
Copy to Project Engineer

Signed: _____
Paving Inspector

QMP HOT-MIX ASPHALT

Q.A. Mixture Report

TMD-005 **Project Number** _____

Contractor Report No.'s		M.D.O.T. Dist. Report No.'s	
Day No.	Test No.	Q.A. No.	Lab No.

MDOT Mix No. _____ Type Mix _____ A.C. Source _____ Placed As _____

Contractor _____ Sub-Contr. _____ Agg. BSG. _____ Job Mix AC _____

J. M. VMA _____ J. M. Voids _____ J.M. % Cr. Mat'l. _____ J.M. % L. S. Ret. _____

Producer of Mix _____ % Crush Count _____ % L. S. Ret. _____

Date Produced _____ Date Comparison Made _____

Extraction					**Max. Sp. Gr. (Gmm)**		
						# 1	**# 2**
Sample Mass, g					Sam. Mass		
Dry Mass, g					Cali. Mass		
Extr. Mass, g		MDOT	MDOT	Diff. from	Mass in Water		
Job Mix	Sieve Size	Mass Ret.	% Passing	Contr. QC	SSD Mass		
	37.5 mm				Dryback Factor		
	25.0 mm				Max Sp. Gr.		
	19.0 mm				MRCF		
	12.5 mm				Corr. Max. SG		
	9.5 mm				Avg. MSG.		
	4.75 mm						
	2.36 mm				AC Content / Moisture Corr.		
	1.18 mm				% AC		
	600 um				Sample Mass		
	300 um				Dry Mass		
	75 um				% Moisture		
					% Corr. AC		

Laboratory Compaction / Void Analysis					
Specimen No.	1	2	3	4	Average
Comp. Temp.					**********
Mass in Air					**********
Mass in Water					**********
Mass SSD					**********
Volume					
Bulk Gr.					
Height (N-MAX)					**********
Height (N-DES)					**********
Bulk Gr.(N-DES)					
EQ. Corr. Factor					**********
BRCF					**********
Corr. Bulk Gr.					
Total Voids %					
VMA %					

DESIGN # GYRATIONS

N (ini) = _____

N(des)= _____

N(max)= _____

Core Density (Evaluation Section or Bias Update)								
Lot No.	1	2	3	4	5	6	7	Average
Station No.								**********
Location								**********
Thickness cm.								**********
Mass in Air								**********
Mass in Water								**********
Mass SSD								**********
Volume								
Bulk Sp. Gr.								
Max. Sp. Gr.								
% Density								
Absorption								

Remarks _____

DISTRIBUTION:

Original to State Materials Engineer
Copy to State Construction Engineer
Copy to District Testing Engineer
Copy to Project Engineer
Copy to Producer Lab File

Signed _____

TMD-006

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
QMP HMA
Summary Report of QC Mixture Properties

Project No.: _____ Contractor: _____ Mix: _____

MDOT JMF No. _____ ACsg _____

Date	Tons	Test	AC	AC AVG-4	Gmm	Gmm AVG-4	Gmb	Gmb AVG-4	VOIDS	Voids AVG-4	VMA	VMA AVG-4	Gsb Blend	Crush
		Design												
		1												
		2												
		3												
		4												
		5												
		6												
		7												
		8												
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		37												
		38												
		39												
		40												

TMD-008

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
QMP HMA
Summary Report of QC Gradation Properties

Project No.: _____ Contractor: _____ Mix: _____

MDOT JMF No. _____

Date	Tons	Test	1/2"	1/2" AVG-4	3/8"	3/8" AVG-4	No.8	No.8 AVG-4	No.30	No.30 AVG-4	No.200	No.200 AVG-4
		JMF										
		1										
		2										
		3										
		4										
		5										
		6										
		7										
		8										
		9										
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		37										
		38										
		39										
		40										

HMA DAILY PLANT SAMPLES RANDOM NUMBERS

TMD-020

DATE _____
PROJECT NO. _____
LOT NO. _____
TYPE OF MIX _____

REQUIRED SAMPLE FREQUENCY

TOTAL ESTIMATED PRODUCTION, tons	NUMBER OF TESTS
50-800	1
801-1700	2
1701-2700	3
2701 +	4

TONNAGE PRODUCED PREVIOUS DAY _____

ESTIMATED TONNAGE FOR DAY (A): _____

NUMBER OF SAMPLES REQUIRED (B): _____

ESTIMATED TONNAGE / SAMPLES (A/B) = C: _____

SELECT 4 RANDOM NUMBERS AND ENTER BELOW (4 random numbers should be selected regardless of the number of tests required. Use additional random numbers if production exceeds the estimated tonnage.

RANDOM NO. 1 (R1) _____ SAMPLE TONS 1 = **(C x R1)** _____

RANDOM NO. 2 (R2) _____ SAMPLE TONS 2 = **(C+(C x R2)** _____

RANDOM NO. 3 (R3) _____ SAMPLE TONS 3 = **(2 x C)+(C x R3)** _____

RANDOM NO. 4 (R4) _____ SAMPLE TONS 4 = **(3 x C)+(C x RS4)** _____

COLD FEED RATES (%)

AGG # 1 _____
AGG # 2 _____
AGG # 3 _____
AGG # 4 _____
AGG # 5 _____
AGG # 6 _____
AGG # 7 _____

IF THE COLD FEED RATES ARE CHANGED MORE THAN 5% FROM THE JMF, RECALCULATE THE COMBINED AGGREGATE BSG AND NOTE THAT CHANGE ON YOUR ASPHALT REPORT

SIGNED _____

TMD-042
Rev. 10/98

MISSISSIPPI DEPARTMENT OF TRANSPORTATION

Bituminous Mix Design for _____ Course
(SIZE - TYPE)

Date: _____

Project No._____ County _____ Contractor _____ Sub-Contr. _____

TEST DATA: ___Original Design ___Revised Design ___Transfer: From Proj. No. _____

MDOT Lab No. _____

Sample No.						**Agg. Blend % Passing**	**Job Mix % Passing**	**Spec. Design Range**
Type Material								
Aggregate Source								
Percent of Material Used in Blend								
Sieve Size	**Gradation (Percent by Weight Passing)**							
1-1/2"								
1"								
3/4"								
1/2"								
3/8"								
No. 4								
No. 8								
No. 16								
No. 30								
No. 50								
No. 100								
No. 200								
% Clay						**Comb. Aggr. Blend Properties**		
PI -40 Material							% Total Clay	
% Crushed, + #4							Dust/Binder Ratio	
Apparent SG, Gsa							% Crushed, + #4	
Bulk SG, Gsb							Apparent SG, Gsa	
% Abs. Moisture							Effective SG, Gse	
							Bulk SG, Gsb	
							% Abs. Moisture	
							Thin & Elong. Pcs., %	
							Sand Ratio	
						Mix Properties @ Ndes		
							Mix Temp.	
							Air Voids, Pa, %	
							VMA, %	
							Absorbed AC by wt. of Total Mix, %	
							Effective AC, %	
							Max. SG, Gmm (Dry Back)	

Gyratory Compaction

Revolutions: Nini = _____ Ndes = _____ Nmax = _____

Compaction Temp. _____ Bulk Spec. Grav. @ Ndes (Gmb) = _____
(ATTACH VISCOSITY CHART)

Analysis of Stripping

TSR = _____ % Visual Stripping = _____ %

Antistrip Addition: Rate = _____ % by wt. of AC Source: _____

Asphalt Cement

Source _____ Grade _____ Spec. Grav. _____

AC (RAP) _____ % AC (New) _____ % Total AC _____ %

The percentage of Asphalt Cement of the grade specified above to be used with the above blend of mineral aggregates for the _____ Course is _____ % by weight of the total mixture.

Remarks: _____

_____

_____
SIGNATURE

TMD-122
Rev. 1-94

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
MATERIALS DIVISION
JACKSON, MS

DAILY REPORT FOR PRESSURE GROUTING

1. Report No. _____ Date _____ _____ MS

2. Project No. _____ County _____ Route No. _____

3. Contractor _____ Cement Brand _____ Type _____

4. Station _____ Station _____ Weather _____

GROUP BATCH QUANTITIES

5. Batch No.	Atmosphere Temperature (°C)	% Calcium Chloride	Calcium Chloride (Lbs.)	Cement Lbs.	Fine Sand (Cu. Yds.)	No. Holes Pumped	Sand Cement Ratio	Flow (Seconds)
6. TOTAL								

7. Remarks _____

Submit Copies to: State Materials Engineer (1)
State Construction Engineer (1)
District Engineer (1)
Project File (1)

Submit original with final estimate

Certified Correct _____
Inspector

TMD-123
Rev. 1-96

MISSISSIPPI DEPARTMENT OF TRANSPORTATION

MATERIALS DIVISION
JACKSON, MS

DAILY REPORT FOR CEMENT CONCRETE PAVEMENT

Report No. _____

_____ , MS

Date _____

PROJECT INFORMATION

PROJECT NUMBER	PLACED TODAY
County	Sta. to Sta.
Road	Equations (+ Total Lineal Feet))
Length (Miles)	Linear Feet
Contractor	Sq. Yards
Pavement Insp'r.	Cubic Yards - Theo.
Laboratory Insp'r.	Cubic Yards - Actual
Plant Insp'r.	Avg. Pav't. Thick. (In.)
Weather	No. Batches Used
RATE OF PROGRESS ON PROJECT Roadway (% Complete)	Other (% Complete)

CONCRETE BATCH QUANTITIES

	Water (Gals.) (Lbs.)	Fly Ash (Lbs.)	Cement (Lbs.)	F. A. (Lbs.)	C. A. (Lbs.)
Dry Batch Amts.					
Av. Moist. Cor.					
Av. Batch Amts.					

TIME OF DAY	F. A. MOIST. %	F. A. MOIST. Lbs.	C. A. MOIST. %	C. A. MOIST. Lbs.	TOTAL Lbs. MOIST. CORR.	Lbs. MIXING WATER REQD.	ACTUAL Lbs. Mix water used
Average							

CYLINDER DATA

STATION	Sample No.	Comp. Str. MPa	SLUMP (Inches)

MIX DESIGN INFORMATION

Mix Design Lab. No.
PROPORTIONS (Wt.)
W/C RATIO (Wt.)
CLASS OF FLY ASH
CEMENT REPLACEMENT (%)

EXPANSION JOINTS (Type Filler)

No.	STATION	No.	STATION

INCIDENTAL CONCRETE (Curb, Lug Anchors, Bridge Ends, etc.) Give Locations & Quantities

REMARKS:

NOTE: When Air Entrained Concrete is used, complete and attach TMD-120

SUBMIT COPIES TO: State Materials Engineer, Orig.
District Engineer (1)
State Const. Enginer (1)

Signed: _____

Title: _____

TMD-125
Rev. 1-96

MISSISSIPPI DEPARTMENT OF TRANSPORTATION

MATERIALS DIVISION
JACKSON, MS

DAILY REPORT OF LIME STABILIZATION

REPORT NO. _____

Lime: Brand _____
Unit Weight (lbs./cu. ft.) _____
Water: Source _____
Raw Soil: Clay; Silts; Silty Clay (Circle One)
Std. Dens. (lbs./cu. ft.) _____
Class of Treatment: A; B; C; D; (Circle One)
Depth of Treatment: Specified _____
Range permitted _____
Method of Mixing _____
Type of Rollers _____

Project No. _____
County _____
Contractor _____
Length of Project (Mi.) _____
Progress to Date: (incl. this report) _____
Processed: Lin. Ft. _____
Sq. Yds. _____
Lime Allowed: Lbs. _____
Percent Complete _____

SECTIONS PROCESSED

First Application: (A, B, C, D)						
Date						
Lane						
Station						
to						
Station						
Net Length: Ft.						
Ave. Width: Ft.						
Square Yards						
Lime: % Specified						
Ordered: Lbs.						
Plus 5%: Lbs.						
Spread: Lbs.						
Allowed: Lbs.						
Time:						
Spread Begun:						
Incorp. Complete:						
Temperature: Low (°F)						
High (°F)						
Second Application (Class A); or Compaction after Mellowing Period (Class B)						
Date (A, B) *						
Lane (A, B)						
Station (A, B)						
to						
Station (A, B)						
Net Length: Ft. (A)						
Ave. Width: Ft. (A)						
Square Yards (A)						
Lime: % Specified: (A)						
Ordered: Lbs. (A)						
Plus 5%: Lbs. (A)						
Spread: Lbs. (A)						
Allowed: Lbs. (A)						
Time:						
Spread Begun: (A)						
Incorp. Complete: (A)						
Temperature: Low (°F) (A)						
High (°F) (A)						
Pulverization: Percent (A, B, C)						
Depth: Actual (A, B, C)						

* Information to be shown for class(es) of treatment shown in ( ).
Reports for Classes A and B to be submitted after sections are completed.

Distribution:
Original: State Materials Engineer
cc: Contract Adm. Engineer (To be submitted with final estimate with tickets (pink copies) attached.)
District Materials Engineer
Project Engineer

_____
Inspector

_____
Project Engineer

TMD-128
Rev. 7-93

MISSISSIPPI DEPARTMENT OF TRANSPORTATION

_____ , MS

DAILY REPORT OF CEMENT STABILIZATION

Date: _____ Project No. _____
Report No. _____ County _____
Cement: Brand _____ Inspector _____
Specified % by Vol. _____ Contractor _____
Water: Source _____ Length Proj. (Mi.) _____
Type Cure: _____ Part of Roadway Structure* _____
Method of Mixing _____ Temp.: Low _____ °F High _____ °F
Type of Rollers _____ Weather: A. M. _____ P. M. _____
Type Soil being Stabilized _____ Totals to date (including this report) _____
Std. Density of Raw Soil (Lbs./Cu. Ft.) _____ Processed: Lin. Ft. _____
Lbs. Cement req'd. per sq. yd. _____ Processed: Sq. Yds. _____
Pounds Cement Allowed _____
% Complete _____

*If multiple layer show to which layer this report applies

SECTIONS PROCESSED

Lane						
Station _____ to _____						
Station						
Net Length						
Ave. Width						
Sq. Yards						
Depth: Specified,						
Range Permitted						
Actual Measurements						
Cement (Lbs.) (Each Section)						
Ordered						
Plus 5%						
Spread						
Excess Spread						
Net Allowed						
Passing #4 Sieve (%)						
Time:						
Spreading Begun						
1st Appl. water						
Compaction Completed						
Finishing Completed						

REMARKS: _____

Distribution:
Original: State Materials Engineer
CC: Contract Adm. Engineer**
District Materials Engineer
Project Engineer

_____
Inspector

_____
Project Engineer

**(To be submitted with final estimate with tickets (pink copies) attached.)
(Use back of form if needed)

TMD-132
Rev. 6-05

MISSISSIPPI DEPARTMENT OF TRANSPORTATION

Materials Division
Jackson, Mississippi

To: Project Engineers

From: State Materials Engineer
Mr. Richard Sheffield

Please add the following innage table for the distributor, as listed below, to the calibration charts formerly mailed to you . Any subsequent change or alteration made in the unit described herein which would change the LIQUID LEVEL or CALIBRATED CAPACITY in the tank(s) VOIDS this calibration. when any change is made which alters the calibrations, the unit shall be RECALIBRATED before further use.

Make :
Distributor Serial No.
Mounted on:
Owned by:

Tire Size:

Zero Point to Bottom: {Inches}
Zero Point to Liquid when Full: {Inches}
Total Capacity: {Gallons}
Calibrated at:

Zero Point To Liquid	Gallons In Tank	Zero Point To Liquid	Gallons In Tank	Zero Point To Liquid	Gallons In Tank

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
MATERIALS DIVISION
SAMPLE INFORMATION CARD

1. **SAMPLE ID**: _____ 2. SAMPLE DATE: _____
3. **CONTRACT ID**: _____ 4. **PROJECT (FMS) NO.**: _____
5. **PAY ITEM NO.**: _____ 6. **SAMPLE TYPE**: _____
7. **MATERIAL**: _____
8. APL PRODUCT NAME (if applicable): _____
9. **PRODUCER/SUPPLIER NAME**: _____
10. PLANT (if applicable): _____
11. **QUANTITY REP.**: _____ 12. **SAMPLE UNIT(S)**: _____
13. INTENDED USE: _____ 14. STATION NO.: _____
15. **SAMPLED BY**: _____ 16. **REQUESTED BY**: _____
17. SAMPLED FROM: _____ 18. LOT/BATCH NO.: _____
19. MIX DESIGN TYPE/CLASS: _____ 20. MIX ID: _____
21. TEST(S) DESIRED: _____
22. REMARKS: _____

_____

NOTES: SAMPLE INFORMATION CARD

1. The Sample ID is the ID number used by SiteManager. This number will be assigned by the Materials Division Central Lab for samples submitted by County & Consultant Engineers.
2. The date the sample was taken.
3. This is the SiteManager Contract ID number (as applicable).
4. The Project Number is the FMS 12-Digit Number /Construction Number.
5. The Pay Item Number is the Contract Pay Item associated with the Material Sample (MDOT Projects Only).
6. The Type of Sample Taken. Choose from the following types: Job Control, Information, Mix Design, QA, Stock, State Aid, Source Approval, Research, IAS, and Recheck.
7. Material Name and/or Description.
8. The Brand Name of the Material as listed on the Approved Products List (for applicable materials).
9. The Original manufacturer or approved supplier of the material. (Not the Broker or Vendor)
10. The name of the plant supplying the material, or the Plant Number for Aggregate Sources. List according to the City in which the plant is located. If there are multiple locations within the same city, include a street name for clarification.
11. The quantity of material used on the project represented by the sample, or maximum permitted by SOP No. TMD 20-04-00-000.
12. The unit of measure for the sample (i.e. feet, square feet, pounds, etc.).
13. The intended use of the sample, as applicable.
14. The station number of the sampling location, as applicable.
15. The person's name who took the sample.
16. The project engineer's name or other authorized party that authorized the sample to be tested.
17. The location at which the sample was taken, including but not limited to roadway location, stockpile, etc.
18. The unique identifier that corresponds to the manufacturer's lot and/or batch number, as applicable.
19. The Mix Design type and/or class, as applicable.
20. The ID number assigned to the approved mix design for the sample taken, as applicable.
21. Indicate if the requested testing should include the standard tests run on the sample (to be denoted as "REGULAR") and/or any specific tests that should be run on the sample. For example, "Regular plus soundness and abrasion".
22. Specify anything that might clarify sample information or explain conditions or the circumstances pertaining to the sample.

The fields appearing in red/bold are required for Sample Testing. Samples submitted without this information will not be tested. Refer to the *NOTES* Section of this form for further instruction.

MISSISSIPPI DEPARTMENT OF TRANSPORTATION

INSPECTION OF HOT MIX ASPHALT PLANT

Semi-Annual Inspection

Of The

_____
(Name of Plant)

Location _____ County _____ State _____

Project _____ District _____

Date of Inspection _____ Date of Previous Inspection _____

Type of Plant: Batch _____ Drum Mixer _____ Permanent _____ Portable _____

Make _____ Model or Serial No. _____

Maximum Batch _____ Lbs. Rated Tons Per Hour _____

Inspected By _____ Date _____

	YES	NO
1. **STOCKPILES**		
a. Are stockpiles properly separated?		
b. Is material segregated?		
c. Has contractor submitted and received approval of his intended material sources and his job mix formula?		
d. Is area clean and properly kept?		
2. **GENERAL REQUIREMENTS FOR ALL PLANTS**		
a. Are tanks for storage of asphalt cement equipped for heating the material under effective and positive control at all times?		
b. Are tanks or storage material properly heated?		
c. Is a circulating system for the asphalt cement of adequate capacity to provide proper and continuous circulation between storage tank and proportioning units during the entire operating period?		
d. Is the discharge end of the asphalt cement circulation pipe below the surface of the material in the storage tanks?		

	YES	NO
e. Are all pipe links and fittings steamed, oil jacketed or otherwise properly insulated to prevent heat loss?		
f. Is storage tank capacity such as to insure continuous operation of the plant and uniform temperature of the asphalt cement when it is mixed with the aggregate?		
g. Is a sampling outlet provided in the asphalt feed lines?		
h. Is a drainage receptacle provided for flushing the outlet prior to sampling?		
3. ANTI-STRIP AND OTHER ADDITIVE SYSTEMS		
a. Is anti-strip material added at plant site?		
b. If anti-strip material is added at plant site, does the anti-strip system meet specifications?		
c. If other approved additives are used, are they handled in accordance with an established procedure?		
4. COLD FEED SYSTEM a. Number of Cold Bins _____ b. Does plant have mechanical or electrical means for uniformly feeding the aggregates into the drier?		
c. Does cold feed have a synchronized proportioning method when blending aggregates from two or more bins?		
d. If mineral filler is required, is a separate bin provided?		
e. Is the feeder for mineral filler furnished with the feeder drive positively interlocked and synchronized with the aggregates feeds?		
5. DRIER a. Number of driers _____ b. Is drier of satisfactory design provided?		
6. DUST COLLECTORS AND EMISSION CONTROLS a. What type dust collector is provided?		
b. Is the material collected in the dust collector wasted?		

	YES	NO
c. Can part or all of the material be returned to the aggregate mixture?		
d. Does the plant meet applicable limitations on emissions?		
e. Has company received permit to operate from EPA?		
7. THERMOMETRIC EQUIPMENT		
a. Is a recording pyrometer or armored thermometer located in the asphalt cement feed line near the discharge end at the mixer unit?		
b. Is the plant equipped with recording pyrometers, or armored thermometers or other approved thermometric instruments at the discharge end of the drier?		
c. Has accuracy of pyrometers or thermometers been checked?		
8. SURGE AND STORAGE BINS		
a. Is plant equipped with surge bin?		
b. Is plant equipped with storage bin?		
c. Is unit enclosed, insulated and weather proof?		
d. Is unit equipped with material level indicator?		
e. Is the indicator visible from plant operator or weigh master's station?		
f. Does unit have approved thermometric instrument so placed to indicate automatically the temperature of mixture at discharge?		
g. Is conveyer system covered and insulated (if necessary) so as to prevent excessive loss of heat during transfer of material from mixing plant to storage bin?		
h. Does storage bin have acceptable heating system?		
i. Has surge or storage bin received prior evaluation an approval before using?		
9. SAFETY AND INSPECTION PROVISIONS		
a. Are gears, pulleys, chains, sprockets and other dangerous moving parts thoroughly protected?		
b. Is an unobstructed and adequately guarded passage provided and maintained in and around the truck loading space for visual inspection purposes?		

	YES	NO
c. Does plant have adequate and safe stairways or guarded ladders to plant units such as, mixer platforms, control platforms, hot storage bins, asphalt storage tanks and etc. where inspections are required?		
d. Is an inspection platform provided with a safe stairways for sampling the asphalt mixture from loaded truck?		
10. TRUCK SALES		
a. Are scales capable of weighing the entire vehicle at one time?		
b. Do scales have a digital printing recorder or automatic weight printer?		
c. Have scales been checked and certified by a reputable scales company in the presence of an authorized representative of the Department?		
11. TRANSPORTATION EQUIPMENT		
a. Are truck bodies clean, tight and in good condition?		
b. Do trucks have covers to protect material from unfavorable weather conditions?		
c. Is soapy water or other approved products available for coating trucks?		
d. Is diesel fuel used to prevent material from sticking to truck bodies?		
e. Type of material used. _____		
12. PROVISIONS FOR TESTING		
a. Does size and location of laboratory comply with specifications?		
b. Is laboratory properly equipped?		
c. Is laboratory acceptable?		
SPECIAL REQUIREMENTS FOR BATCH PLANT:		
13. WEIGH BOX OR HOPPER		
a. Is weigh box large enough to hold full batch?		
b. Does gate close tightly so that material cannot leak into the mixer while a batch is being weighed?		

	YES	NO
14. AGGREGATE SCALES a. Are scales equipped with adjustable pointers or markers for marking the weight of each material to be weighed into the batch?		
b. Are ten 5-lb. weights available for checking scales?		
c. Has accuracy of weights been checked?		
d. Have scales been checked and certified by a reputable scales company in the presence of an authorized representative of the Department?		
e. If the plant is equipped with beam type scales, are the scales equipped with a device to indicate at least the last 10 lbs. of the required load?		
15. ASPHALT CEMENT BUCKET a. Is bucket large enough to handle a batch in a single weighing so that the asphalt material will not overflow, splash or spill?		
b. Is the bucket steamed, or oil-jacketed or equipped with properly isolated electric heating units?		
c. Is the bucket equipped to deliver the asphalt material over the full length of the mixer?		
16. ASPHALT CEMENT SCALES a. Have scales been checked and certified by a reputable scales company in the presence of an authorized representative of the Department?		
b. Are scales equipped with a device to indicate at least the last 10 lbs. of the approaching total load?		
17. SCREENS a. Conditions of screens. Satisfactory _____ Unsatisfactory _____ b. Do the plant screens have adequate capacity and size range to properly separate all the aggregates into sizes required for proportioning so that they may be recombined consistently?		
18. HOT BINS a. Number of bins. _____		

	YES	NO
b. Are bins properly partitioned? c. Are bins equipped with overflow pipes?		
d. Will gates cut off quickly and completely?		
e. Can samples be obtained from bins?		
f. Are bins equipped with device to indicate the position of aggregate at the lower quarter point?		
19. ASPHALT CONTROL a. Are means provided for checking the quantity or rate of flow of asphalt material?		
b. Time required to add asphalt material into pugmill.		
20. MIXER UNIT FOR BATCH METHOD a. Is the plant equipped with an approved twin pugmill batch mixer that will produce a uniform mixture?		
b. Can the mixer blades be adjusted to insure proper and efficient mixing?		
c. Are the mixer blades in satisfactory condition?		
d. Does the mixer gate close tight enough to prevent leakage?		
e. Does the mixer discharge the mixture without appreciable segregation?		
f. Is the mixer equipped with time lock?		
g. Does timer lock the weigh box gate until the mixing cycle is completed?		
h. Will timer control dry and wet mixing time?		
i. Can timer be set in five second intervals throughout the designated mixing cycles?		
j. Can timer be locked to prevent tampering?		
k. Is a mechanical batch counter installed as part of the timing device?		
21. AUTOMATION OF BATCHING a. If the plant is fully automated, is an automatic weighing, cycling and monitoring system installed as part of the batching equipment?		
b. Is the automatic proportioning system capable of weighing the materials to within ± 0.5 percent?		

	YES	NO
SPECIAL REQUIREMENTS FOR DRUM MIXERS:		
22. AGGREGATE DELIVERY SYSTEM		
a. Is number of cold feed bins adequate?		
b. Are cold feed bins equipped with devices to indicate when the level of the aggregate in each bin is below the quarter point?		
c. Does the cold feed have an automatic shut off system that activates when any individual feeder is interrupted?		
d. Are provisions available for conveniently sampling the full flow of material from each cold feed and the total cold feed?		
e. Is the total feed weighed continuously?		
f. Are provisions provided for automatically correcting the wet aggregate weight to dry aggregate weight?		
g. Is the flow of aggregate dry weight displayed digitally in appropriate units of weight and time and totalized?		
h. Are means provided for diverting aggregate delivery into trucks, front-end loggers, or other containers for checking accuracy of aggregate delivery system?		
i. Is plant equipped with a scalping screen for aggregate prior to entering on the conveyer weigh belt?		
23. ASPHALT CEMENT DELIVERY SYSTEM		
a. Are satisfactory means provided to introduce the proper amount of asphalt material into the mix?		
b. Does the delivery system for metering the asphalt material prove accurate within ± 1 percent?		
c. Does the asphalt material delivery interlock with aggregate weight control?		
d. Is the asphalt material flow displayed in appropriate units of volume or weight and time and totalized?		
e. Can the asphalt material be diverted into distributor trucks or other containers for checking accuracy of delivery systems?		
24. DRUM MIXER		
a. Is the drum mixer capable of drying and heating the aggregate to the moisture and temperature requirements set forth in the specifications and capable of producing a uniform mix?		

	YES	NO
b. Does plant have provisions for diverting mixes at startup and shut-downs or where mixing is not complete or uniform.		
25. IS PLANT APPROVED FOR USE?		
If no, explain what needs to be corrected by item number.		

SCALE CALIBRATION

Date _____

Make								
Capacity & Increment								
Type Scale	Aggregate		Asphalt			Truck Scale		
Actual Weight, lbs.	Readin	% Error	Actual Weight, lbs.	Reading	% Error	Actual Weight, lbs.	Reading	% Error

Calibrated by _____

This hot mix asphalt plant (is) (is not) approved for the production of hot mix asphalt for Department work.

_____
District Materials Engineer

Distribution:
Asphalt Plant
State Materials Enginineer
State Construction Engineer
*State Aid Engineer
*District Engineer
Project Engineer
*County Engineer

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
Materials Division
Jackson, Mississippi

TMD-323
(Rev. 1-94)

CERTIFICATE OF STORAGE

Project Engineer _____ **Date** _____

Project Number _____ **County** _____

Contractor _____ **Sold to** _____

This is to certify that the following items are in storage at :

Producer _____ **Location** _____

MATERIAL	SIZE	LENGTH	TOTAL QUANTITY	UNIT NUMBER	DATE MANUFACTURED

Remarks: _____

The above items have been inspected and found to meet all requirements and are designated for the above-captioned project.

Signed _____

Title _____

PC: **Original and copy to P.E.**
State Construction Division
District Materials Engineer
State Materials Engineer

TMD-441
Rev. 6-05

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
MATERIALS DIVISION
JACKSON, MISSISSIPPI
Federal Project
CERTIFICATION OF MATERIALS AND TESTS

Project Number--

County----------

Contractor----------

Division Administrator
Federal Highway Administration
Jackson, Mississippi

Dear Sir:

This is to certify that:

1. The Results of the tests in acceptance samples indicate the materials incorporated in the construction work were in conformity with the approved plans and specifications, and are properly covered by samples and accepted in accordance with State Policy and Procedures. Exceptions, if any, are explained on the attached Form TMD-445.

2. The results of the testing referred to in the above paragraph compare favorably with the results of independent assurance sampling and testing. Exceptions, if any, are explained on the attached Form TMD-444.

Very truly yours,

Attachment(s)

Richard H. Sheffield, P. E.
State Materials Engineer

PC:---------- **Central Records----(via Portera) (71-01, 96-20)**
Asst. Chief Engr-Field Oprs. -Melinda McGrath (91-01)
Construction Engineer- Brad Lewis (73-01)
Contract Administration - B. B. House (74-01)
District Engineer---------
District Mtls. Engineer-
Project Engineer--------
Lab File

TMD-442
Rev. 6-05

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
MATERIALS DIVISION
JACKSON, MISSISSIPPI
State Project
CERTIFICATION OF MATERIALS AND TESTS

Project Number--

County----------

Contractor----------

Construction Engineer
Department of Transportation
Jackson, Mississippi

Dear Sir:

This is to certify that:

1. The Results of the tests in acceptance samples indicate the materials incorporated in the construction work were in conformity with the approved plans and specifications, and are properly covered by samples and accepted in accordance with State Policy and Procedures. Exceptions, if any, are explained on the attached Form TMD-445.

2. The results of the testing referred to in the above paragraph compare favorably with the results of independent assurance sampling and testing. Exceptions, if any, are explained on the attached Form TMD-444.

Very truly yours,

Richard H. Sheffield, P. E.
State Materials Engineer

Attachment(s)

PC:---------- **Central Records----(via Portera) (71-01, 96-20)**
Asst. Chief Engr-Field Oprs. -Melinda McGrath (91-01)
Contract Administration - B. B. House (74-01)
District Engineer---------
District Mtls. Engineer-
Mtls.Div. **Project Engineer--------**
Lab File

TMD-444
Rev. 6-05

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
MATERIALS DIVISION
Jackson, Mississippi
List of Non-favorable Comparisons
of Independent Assurance Samples With
Job Control Samples

Project #-- ***Contr.-----*** ***Proj. Engr.-***

County----- ***District-------***

Laboratory Number	Material	*Remarks*

Verification and Acceptance of the TMD-891 and the TMD-890's by I. A. S. Chief :

Signature :_____

Date :_____

TMD-445
Rev. 6-05

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
MATERIALS DIVISION
Jackson, Mississippi
Listing of Job Control Variations

Project #-- ***Contr.-----*** ***Proj. Engr.-***

County---- ***District-------***

Laboratory Number	***MATERIAL***	**Remarks**

*All test values or test results used in determining compliance for clearance of materials, such as bituminous asphalt pavement mix, grass seed, agricultural limestone and concrete pavement thickness, that indicate deficiencies from the contract's specified values and where such materials are allowed to remain in place shall be handled in accordance with applicable project documents and specifications.

TMD - 522
Rev. 1 - 94

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
MATERIALS DIVISION
JACKSON, MS
FIELD DENSITY REPORT FOR EMBANKMENTS
(MT - 16)

PROJECT _____

COUNTY _____ CONTRACTOR _____ TECHNICIAN _____

COMPONENT: Basement Soil _____ Design Soil _____ BORROW MAT'L: Class _____

TREATMENT: None _____ Lime (by Wgt.), 1st Appl. _____ % 2nd Appl. _____ %

DESIGN THICKNESS (Inches) _____ LIFT _____

1. Lot No.							
2. Lot Size							
3. Date of Test							
4. Time of Test							
5. Station Limits of Lot							
6. Station No. at Test Site							
7. Location from Left Edge, Ft.							
8. Depth Below Subgrade, Inches							
9. Depth of Test, Inches							
STD DENS — 10. Std. Density Curve No.							
STD DENS — 11. Optimum Moisture, %							
STD DENS — 12. Std. Density, PCF							
FIELD DENSITY TEST — 13. Gage Moisture Bias (+) or (-)							
FIELD DENSITY TEST — 14. Dry Density, PCF							
FIELD DENSITY TEST — 15. Moisture, %							
FIELD DENSITY TEST — 16. Density, % of Std.							
FIELD DENSITY TEST — **VERIFICATION TESTS**							
FIELD DENSITY TEST — 17. Dry Density, PCF							
FIELD DENSITY TEST — 18. Moisture, %							
FIELD DENSITY TEST — 19. Density, % of Std.							
FIELD DENSITY TEST — 20. Avg. Lot Density % of Std.							
21. Required Density, % of Standard							

REMARKS: _____

_____

DISTRIBUTION:
Original - Project Engineer
State Materials Engineer
State Construction Engineer
District Materials Engineer

Signed _____

Title _____

(Instructions on reverse side)

INSTRUCTIONS FOR COMPLETING FORM TMD - 522

This form is for use in recording density test data on embankments. The form is to be completed for each density test.

Line 1: Number, running in numerical order, assigned to each Lot.

Line 2: Size of the Lot, as set out in the specifications, on which acceptance or rejection is based.

Line 3 & 4: Date and time each density test performed.

Line 5 - 9: Location of each density test.

Line10: Number assigned to the Standard Density Curve to be used in determining the percent of Standard Density and Optimum Moisture at each test site.

Line 11: Optimum Moisture from the Standard Density Curve corrected to include the moisture for the amount of material retained on the 1/2 inch sieve at the density test site using the nomograph. When there is no material retained on the 1/2 inch sieve, the Optimum Moisture is taken directly from the Standard Density Curve.

Line 12: Standard Density from the Standard Density Curve corrected to include the amount of material retained on the 1/2 inch sieve at the density test site using the nomograph. When there is no material retained on the 1/2 inch sieve, the Standard Density is taken directly from the Standard Density Curve. This Standard Density is programmed into the nuclear gage.

Line 13: The nuclear gage measures moisture content based on total hydrogen in the soil. Some soils may contain chemically bound hydrogen which would result in an erroneous moisture content if it is not corrected. This condition may occur in soils or soil-aggregate mixtures containing high gypsum content, lime, cement, high calcium content, etc. Moisture correction factor for such conditions must be determined and applied in accordance with the Nuclear Gage Instruction Manual. The correction factor with a plus (+) or minus (-) sign is to be programmed in the Nuclear Gage.

Line 14 - 16: Used for recording the field density test data.

Line 17 - 20: If the density on Line 16 does not meet the required density, a verification test must be performed and recorded on Lines 17 - 20. Line 20 equals the average of Lines 16 and 19, and is the Test Value for the Lot. If the density on Line 16 meets, then Lines 17 - 20 will be blank.

Line 21: Record the required density for each Lot.

TMD-524
Rev. 7-96

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
MATERIALS DIVISION
JACKSON, MS
STRUCTURAL BACKFILL, SUBBASE, BASE & SHOULDERS
(MT - 16)

PROJECT _____ LOT SIZE _____ LOT NO. _____

COUNTY _____ CONTRACTOR _____ TECHNICIAN _____

COMPONENT: Structural Backfill _____ Subbase _____

Shoulders _____ Base _____

TREATMENT: None ____ Cement (by Vol.) _____ % Lime (by Wgt.) _____ % Fly Ash (by Wgt.) _____ %

GRANULAR MATERIAL: Class _____ Group _____ BORROW MATERIAL: Class _____

DESIGN THICKNESS (Inches) _____ LIFT: _____

1. Sublot No.		1	2	3	4	5	
2. Date of Test							
3. Time of Test							
4. Station Limits of Sublot							
5. Station No. At Test Site							
6. Location from Left Edge, Ft.							
7. Depth of Test, Inches							
STD DENS	8. Std. Density Curve No.						
	9. Optimum Moisture, %						
	10. Std. Density, PCF						
FLD DENSITY	11. Gage Moisture Bias (+) or (-)						
	12. Dry Density, PCF						Average Density of Lot %
	13. Moisture, %						
	14. Density, % of Std.						
15. Required Density, % of Standard							

REMARKS: _____

DISTRIBUTION:
Original - Project Engineer
State Materials Engineer
Stae Construction Engineer
District Materials Engineer

Signed _____

Title _____

(Instructions on reverse side)

INSTRUCTIONS FOR COMPLETING FORM TMD - 524

This form is for use in recording density test data on structural backfill; and treated or untreated soil and soil-aggregate mixtures located in the subgrade, subbase, base or shoulders. This form is to be completed for each density test performed.

Line 1: Except for structural backfill, each Lot is divided into five equal Sublots numbered "1" through "5". Structural backfill Lots are divided into a minimum of four Sublots numbered "1" through "4".

Line 2 & 3: Date and time each density test performed.

Line 4-7: Location of each density test.

Line 8: Number assigned to the Standard Density Curve to be used in determining the percent of Standard Density and Optimum Moisture at each test site.

Line 9: Optimum Moisture from the Standard Density Curve corrected to include the moisture for the amount of material retained on the 1/2 inch sieve at the density test site using the nomograph. When there is no material retained on the 1/2 inch sieve, the Optimum Moisture is taken directly from the Standard Density Curve.

Line 10: Standard Density from the Standard Density Curve corrected to include the amount of material retained on the 1/2 inch sieve at the density test site using the nomograph. When there is no material retained on the 1/2 inch sieve, the Standard Density is taken directly from the Standard Density Curve. This Standard Density is programmed into the Nuclear Gage.

Line 11: The Nuclear Gage measures moisture content based on total hydrogen in the soil. Some soils may contain chemically bound hydrogen which would result in an erroneous moisture content if it is not corrected. This condition may occur in soils or soil-aggregate mixtures containing high gypsum content, lime, cement, high calcium content, etc. Moisture correction factor for such conditions must be determined and applied in accordance with the Nuclear Gage Instruction Manual. The correction factor with a plus (+) or minus (-) sign is to be programmed in the Nuclear Gage.

Line 12-14: Used for recording the field density test data.

Line 15: Record the required density for Sublots (Individual tests) and for the Lot (Average of Sublots).

TMD-725cg

Rev. (1/96)

Mississippi Department of Transportation

Materials Division

Jackson, Mississippi

MDOT

Central Laboratory

To : Mr. Richard H. Sheffield
State Materials Engineer

Project No : ____________
#2 ____________
#3 ____________
#4 ____________

County : ____________

Proj. Engineer------------ : ____________

Mail Code------------------- : ____________

Date of Final Inspection : ____________
Contractor-------------------: ____________

STATEMENT OF ESTIMATED FINAL QUANTITIES AND CERTIFIED TEST OF MATERIALS

This is to certify that all materials used in the construction of the captioned project have been tested and meet the requirements of the specifications and futher certify that the quantities have been checked against and agrees with the most recent Contractor's Monthly Estimate. Listed below are approximate final quantities of construction materials requiring tests :

ITEM NO :	ITEM OR MATERIAL	FINAL QUANTITY ESTIMATED	UNIT	QUANTITY COVERED BY TEST REPORTS

Distribution :

Original : State Materials Engineer
PC : State Construction Engineer
Contract Administration Engineer
District Engineer
District Materials Engineer
Contractor
Project File

Project Engineers Signature

Page #1

TMD-892
Rev. 6-05

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
Materials Division

Form for Reviewing Field Verification Testing of Portland Cement Concrete Mixtures

SiteManager #

Field Verification of MDOT Mixture #

DATE: _____

PROJECT NO.: _____ PCC PRODUCER: _____

COUNTY: _____ PCC PRODUCER'S MIXTURE NO..: _____

CONTRACTOR: _____ PLANT LOCATION: _____

MIX QUANTITIES

Material	Source	Description	Bulk Specific Gravity	Unit Weight (lb/yd³)	Fineness Modulus	Quantities Oven-Dry (lb/yd³)	Absolute Volume (yd³)
Cement							
Fly Ash							
GGBFS							
Water							
Fine Agg.							
Coarse Agg.							
Air-entraining*							
Admixture*							
Admixture*							
Admixture*							
Admixture*							
					Total		

BATCH QUANTITIES Batch Volume: _____ yd³

Material	Target Batch Weight (lb/yd³)	Actual Batch Weight (lb/yd³)	Actual Weight per yd³ (lb/yd³)	Total Moisture (%)	Absorption (%)	Surface Moisture (%)	Surface Moisture (lb)	Actual Dry Weight (lb/yd³)
Cement								
Fly Ash								
Slag								
Water								
Fine Agg.								
Coarse Agg.								
Air-entraining*								
Admixture*								
Admixture*								
Admixture*								
Admixture*								
Total							**Total**	

Water Content _____ lb

Slump _____ **within minus (–) 1-1/2 in. of maximum

Air Content _____ within minus (–) 1-1/2 percent maximum

Temperature _____ °F

Unit Weight _____ lb/yd³

Yield _____ within ± 2%

FINE AGGREGATE

Initial Weight (g) _____

Sieve	Accum. Wt. Retained	Total % Passing	Gradation Requirements
1/2 inch			**100**
3/8 inch			**97-100**
No. 4			**92-100**
No. 8			**75-100**
No. 16			**45-90**
No. 30			**25-70**
No. 50			**3-35**
No. 100			**0-10**
Pan			

COARSE AGGREGATE

Initial Weight (g) _____ Size: _____

Sieve	Accum. Wt. Retained	Total % Passing	Gradation Requirements
2 inch			
1-1/2 inch			
1 inch			
3/4 inch			
1/2 inch			
3/8 inch			
No. 4			
No. 8			
Pan			

Note: * Weights for admixtures are reported in fluid ounces (fl. oz.).
** A minimum of 2.5 in. slump is allowed for mixes containing Type F or G chemical admixture.

Remarks:

TMD-895
Rev. 6-05

Mississippi Department of Transportation

Materials Division

Prestress Data Report

Project Number: _____ **County:** _____

Unit Number	Date Cast	Tensioning Report	Concrete Test Report	Inspection Report	Steam and/or Maturity Report	Steel Test Report and/or Manufacturer Certification	Aggregate Gradation Report

Data Checked by: _____ Date: _____

Original To: State Materials Engineer
Copies: State Construction Engineer
Bridge Engineer
District Materials Engineer
Project File

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
MATERIALS DIVISION
PRE-TESTED MATERIALS SHIPMENT REPORT REQUEST FORM

COUNTY AND CONSULTANT PROJECT ENGINEER REQUEST FOR A SHIPMENT REPORT OF MDOT PRE-TESTED MATERIALS

PROJECT NO.:______________________________ COUNTY:______________________________

DATE: _____________________ TO:_____________________ FROM:_____________________

MANUFACTURER	MATERIAL	QUANTITY	UNITS	LOT# OR BATCH#	MDOT STAMP#

THE ABOVE LISTED MATERIALS WERE FROM PRE-TESTED STOCK.

AUTHORIZED BY:______________________________ MONTHLY ESTIMATE DATE:_________________________

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
INFORMATION FOR PRODUCT EVALUATION COMMITTEE

DATE: _____

FOR NEW MATERIAL OR NEW PRODUCT

Trade Name: _____

Manufacturer: _____

Address: _____
Street or P.O. Box City State Zip Code

Phone Number: (_____) _____ - _____

FAX Number: (_____) _____ - _____

Represented by: _____

Address: _____
Street or P.O. Box City State Zip Code

Phone Number: (_____) _____ - _____

FAX Number: (_____) _____ - _____

Material/Product Data:

Patented? Yes: _____ No: _____ Applied for: _____

New to market? Yes: _____ No: _____

Recommended Use: _____

_____

Use for which the product is to be evaluated: _____

_____

Outstanding Features or Advantages: _____

_____

_____

Composition: _____

_____

Specifications furnished by Manufacturer? Yes: _____ No: _____

Drawing, picture, or sketch furnished by Manufacturer? Yes: _____ No: _____

Has this product been evaluated by the National Transportation Product Evaluation Program (NTPEP): Yes: _____ No: _____

If yes, please provide all applicable NTPEP report citation(s), evaluation dates, and information:__

_____

_____

Meets requirements of following specifications:

MDOT: _____; AASHTO: _____;

ASTM: _____; Federal Specification _____;

Others (Please List):_____

_____

Availability:

Seasonal?	Yes: _____	No: _____
Are quantities limited?	Yes: _____	No: _____
Will sample be furnished?	Yes: _____	No: _____
Will laboratory analysis be furnished?	Yes: _____	No: _____

Delivery at Site in _____days after receipt of order.

Product Competitors:

Alternate for what existing material or product: _____

_____

Are costs comparable to materials or products now being used in Mississippi? Yes:___ No:___

If the answer is no, what is difference? _____

_____

_____

Product Warranty Information:

Is material or product guaranteed? Yes: _____ No: _____

Conditions_____

_____

FOR NEW PROCEDURE(S)

Description of Proposed Procedure: _____

_____

_____

_____

Proposed by: _____

Address: _____
Street or P.O. Box City State Zip Code

Representing: _____

Address: _____
Street or P.O. Box City State Zip Code

Outstanding Features or Advantages: _____

_____

_____

_____

Detailed procedure furnished? Yes:___ No:____

Are costs comparable to procedure(s) now being used in Mississippi? Yes:___ No:____

If the answer is no, what is difference? _____

_____

_____

Alternate for what existing procedure? _____

_____

_____

THE FOLLOWING IS APPLICABLE TO:

NEW MATERIAL, NEW PRODUCT, OR NEW PROCEDURE

Approved for use by highway authorities or other agencies in the following states: _____

_____

_____

Being used? Yes:___ No:____ On trial basis? Yes:___ No:____

Are instructions or directions for installation, application or use available? Yes:___ No:____

Will demonstration be provided? Yes: _____ No: _____

Are educational courses or films available? Yes: _____ No: _____

If proprietary, what are royalty costs and on what basis are they collected? _____

_____

_____

Background description of company offering this proposal: _____

_____

_____

Whom have you contacted in the Mississippi Department of Transportation? _____

_____

Has this proposal been made previously? Yes: _____ No: _____

Additional information:_____

_____

_____

_____

_____

_____

_____

_____

Additional information Continued:_____

Person Completing Form: _____

Title: _____

E-Mail Address: _____

Firm Represented: _____

For consideration by the Mississippi Department of Transportation Product Evaluation Committee, please submit the original of this form plus one copy and duplicate copies of any relative information (such as product brochures) to the following address:

STATE MATERIALS ENGINEER
MISSISSIPPI DEPARTMENT OF TRANSPORTATION
P.O. BOX 1850
JACKSON, MISSISSIPPI 39215-1850